Course Application

NUCLEAR NONPROLIFERATION, SAFEGUARDS AND SECURITY (NNSS) IN THE 21st CENTURY

Brookhaven National Laboratory

June 13 - July 1, 2011

- Complete all applicable fields, and note the eligibility requirements in the last question.
- Send the completed application by regular mail or as an e-mail attachment to:
- NNSS Course, Building 197C, Brookhaven National Laboratory, Upton, New York 11973; nnss@bnl.gov
- Have transcripts of your undergraduate and graduate records sent to NNSS Course
- In addition to providing information about persons who serve as references on your behalf, please ask them to mail letters of recommendations to NNSS Course.
- If you need more room to answer a question, add text on the blank page at the end, indicating by number the question to which the supplementary text refers.
- Applications and letters of recommendation must be received by March 4, 2011.

NOTE: Only completed applications with two recommendations will be reviewed by the course coordinators.

	Applicant Pe	ersonal Information	
1First Name	Middle Name	Last Name	Suffix
2. Please enter your two mo	ost commonly used e-mai	il addresses:	
Primary:			
Alternate:			
3. Address			
Street:		<u></u>	
	_	<u></u>	
City:			
		<u></u>	
•			
Alternate Contact P	hone:	(555) 555-5555	
4. Citizenship:			
U.S. Citizen: Yes [] No 🗌		
If no, then:			
Citizen of:			

5. Date of Birth:	(mm/dd/yyyy)
6. Month and year of high school graduation:	(mm/yyyy)
7. Select the option that best describes your acad	lemic status.
☐ Entering graduate school in 2011	
☐ In first year of graduate school	
☐ In second year (or later years) of grade	uate school
☐ Received graduate degree	
8. Are you a relative of an employee at Brookhave (Relatives consist of parents, grandparents, brookhave)	
☐ Yes ☐ No	
9. What is your primary spoken language?	
10. What other languages do you speak?	
Applicant E	ducational Information
11. <u>Undergraduate</u> Degree College/University:	
College/University Address:	
City: State/Province:	
Zip Code:	
Country:	
College/University Phone:	
Enrollment Date:	(mm/yyyy)
Graduation Date:	(mm/yyyy)
Other Major or Minor Subject(s):	

12. Please provide the following information about an <u>undergase</u> as a reference on your behalf:	graduate faculty member in your major who can serve
•	
First Name:	
Last Name:	
Phone:	
E-mail:	
Address 1:	
Address 2:	
City:	
State/Province:	
Country:	
Zip Code:	
13. Graduate College/University Attending, Entering in 2011	
(This information is used to notify your College/University whether the control of the control o	nen you accept an internship)
Department/School:	
Describes and Order and Address as	
Department concon Address.	
City:	
State/Dravings:	
7in Code	
Country	
D (((0 1 D)	
Name of Department/School Head:	
- " '5'	(mm/yyyy)
	(mm/yyyy)
Dograp Expected:	
Major and Minor Cubicat/a)	
	
14. Please provide the following information about a graduat	e faculty member in your major who can serve as a
reference on your behalf:	
First Name:	
Last Name:	
Phone:	
E-mail:	

	Address 1:						
	Address 2:						
	City:						
	State/Provinc	e:					
	Country:						
	Zip Code:						
15.	approximate date	ges and universities tes of attendance and	major subject a	ind indicate any			
16.		or Awards. Enter "N					
17.	Laboratories? Ye b. If yes, when ar	r had an internship or s	rnship or fellow	ship occur? Brie	efly describe you	- -	
18.		nt information since y (enter "NONE" if app					
19.	List all courses yo	ou are currently taking	g. Enter "NONE	" if applicable.			

Please answer **each** of the following questions in essay form using no more than 250 words. We recommend you complete the essay questions using a word processor (to check spelling and grammar) and then copy and paste your answers into the text boxes.

20. What other experiences or background would you bring to the course?
21. At this point in your education, what will your chosen career path be and why?
22. Please write an essay of at most two pages (500 words) addressing one of the following questions. Appendit as a document to the end of this application.
Why do you desire to be a student in the course NUCLEAR NONPROLIFERATION, SAFEGUARDS AND SECURITY (NNSS) IN THE 21 st CENTURY?
OR
What steps would you consider recommending to improve U.S. nuclear security?
23. a. Would any U.S. Government agency be providing you with monetary support for the June 13 – July 1, duration of the course other than the stipend associated with the course? Yes \(\square{1} \) No \(\square{1} \)
b. If yes, please explain:
24. Certification of eligibility requirements:
(1) My answers to the previous questions are accurate and complete
(2) I will be 18 years of age or older at the time of the appointment.
(3) I understand that I have to provide official transcripts in order to participate.
(4) I will have medical insurance covering the duration of the course.
(5) I will attend all three weeks of the course.
☐ I certify that the above information is correct (Check the box to certify the five statements.)
Signature required; electronic or via a cursive font Date
END OF APPLICATION QUESTIONS

Essay Page 1

Essay Page 2

Supplementary Page (question numbers and text supplements)